

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70585	
O.I.P.E. CLASSIFIER		71090	02-02-00
FORMALITY REVIEW		71090	7/16/00
RESPONSE FORMALITY REVIEW			4/25/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	8 10 3 12 4
1	01 01 02 02 04
2	✓
3	N
4	N
5	N
6	N
7	✓
8	✓
9	N
10	N
11	0
12	0
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	0
21	✓
22	✓
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	0
40	0
41	0
42	✓
43	✓
44	✓
45	0
46	0
47	0
48	0
49	✓
50	0

Claim	Date
Final Original	12 4
1	02 04
51	✓
52	0
53	0
54	0
55	0
56	0
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	✓
67	✓
68	✓
69	✓
70	✓
71	0
72	✓
73	✓
74	✓
75	✓
76	✓
77	0
78	✓
79	✓
80	✓
81	0
82	0
83	✓
84	✓
85	✓
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88	✓
89	✓
90	✓
91	✓
92	✓
93	✓
94	✓
95	✓
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97	✓
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99	✓
100	✓

Claim	Date
Final Original	
101	
102	
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If more than 150 claims or 10 actions
staple additional sheet here

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